

FILE NO. \_\_\_\_\_

## TOWN OF LOS ALTOS HILLS

### SERVICE REQUEST

ADDRESS \_\_\_\_\_ DATE \_\_\_\_\_

NAME \_\_\_\_\_ TIME \_\_\_\_\_

HOME PHONE \_\_\_\_\_ DAY PHONE \_\_\_\_\_

PREVIOUS CALLS \_\_\_\_\_ RECEIVED BY \_\_\_\_\_ TELEPHONE \_\_\_\_\_ IN PERSON \_\_\_\_\_

REQUEST \_\_\_\_\_

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REQUEST ASSIGNED TO \_\_\_\_\_

ACTION TO BE TAKEN \_\_\_\_\_

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ACTION TAKEN \_\_\_\_\_

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REQUEST COMPLETED \_\_\_\_\_ DATE \_\_\_\_\_ BY \_\_\_\_\_

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### REQUESTER NOTIFIED

DATE \_\_\_\_\_ BY \_\_\_\_\_ TELEPHONE \_\_\_\_\_ IN PERSON \_\_\_\_\_ MAIL \_\_\_\_\_